

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Nexus Bankruptcy Benjamin Heston (SBN 297798) 3090 Bristol Street #400 Costa Mesa, CA 92626 Phone: (949) 312-1377 Email: ben@nexusbk.com <input type="checkbox"/> Individual appearing without attorney <input checked="" type="checkbox"/> Attorney for Debtor	FOR COURT USE ONLY
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - RIVERSIDE DIVISION	
In re: Lara Fakhoury	CASE NO.: 6:25-bk-15107-SY CHAPTER: 13
Debtor(s)	SUMMARY OF AMENDED SCHEDULES, MASTER MAILING LIST, AND/OR STATEMENTS [LBR 1007-1(c)]

A filing fee is required to amend Schedules D or E/F (see [Abbreviated Fee Schedule](#) on the Court's website www.cacb.uscourts.gov). A supplemental master mailing list (do not repeat any creditors on the original) is required as an attachment if creditors are being added to the Schedule D or E/F.

Are one or more creditors being added? ☐ Yes ☒ No

The following schedules, master mailing list or statements (check all that apply) are being amended:

- | | | | | |
|---|--|---|---------------------------------------|---|
| <input type="checkbox"/> Schedule A/B | <input type="checkbox"/> Schedule C | <input type="checkbox"/> Schedule D | <input type="checkbox"/> Schedule E/F | <input type="checkbox"/> Schedule G |
| <input type="checkbox"/> Schedule H | <input checked="" type="checkbox"/> Schedule I | <input checked="" type="checkbox"/> Schedule J | <input type="checkbox"/> Schedule J-2 | <input type="checkbox"/> Statement of Financial Affairs |
| <input type="checkbox"/> Statement About Your Social Security Numbers | | <input type="checkbox"/> Statement of Intention | | <input type="checkbox"/> Master Mailing List |
| <input type="checkbox"/> Other (<i>specify</i>) _____ | | | | |

I/we declare under penalty of perjury under the laws of the United States that the amended schedules, master mailing list, and or statements are true and correct.

Date: 09/16/2025



Lara Fakhoury
Debtor 1 Signature

Debtor 2 (Joint Debtor) Signature (if applicable)

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California

Fill in this information to identify your case:

Debtor 1	<u>Lara</u>	<u>Fakhoury</u>
	First Name	Middle Name Last Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name Last Name
United States Bankruptcy Court for the:	<u>Central</u>	District of <u>California</u>
Case number	<u>6:25-bk-15107-SY</u>	
(if known)		

Check if this is:

- ☒ An amended filing
☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

Occupation

Caregiver

Employer's name

In-Home Supportive Services

Employer's address

784 E Hospitality Ln

Number Street

Sn Bernrdno, CA 92415-0009

City State ZIP Code

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Finance managerELJO, LLC2209 E Baseline Rd Ste 307

Number Street

Claremont, CA 91711-7901

City State ZIP Code

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$4,346.67 \$15,383.33

3. Estimate and list monthly overtime pay.

3. + \$0.00 + \$0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$4,346.67 \$15,383.33

Debtor 1

Lara**Fakhoury**Case number (if known) **6:25-bk-15107-SY**

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$4,346.67	\$15,383.33
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$332.52	\$3,687.86
5b. Mandatory contributions for retirement plans	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	\$0.00	\$0.00
5e. Insurance	\$52.16	\$184.60
5f. Domestic support obligations	\$0.00	\$0.00
5g. Union dues	\$0.00	\$0.00
5h. Other deductions. Specify: _____	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$384.68	\$3,872.46
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$3,961.99	\$11,510.87
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$0.00	\$0.00
8b. Interest and dividends	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$0.00	\$0.00
8d. Unemployment compensation	\$0.00	\$0.00
8e. Social Security	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	\$0.00	\$0.00
8g. Pension or retirement income	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$3,961.99	\$11,510.87
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	\$0.00	\$0.00

Debtor 1

Lara

Fakhoury

Case number (if known) **6:25-bk-15107-SY**

First Name

Middle Name

Last Name

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income.
Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies

12.

\$15,472.86

**Combined
monthly income**

13. **Do you expect an increase or decrease within the year after you file this form?**

☐ No.

☒ Yes. Explain:

The payroll deductions for Debtor's spouse are estimates as he has not received his first paycheck as of the filing of this amendment.

Fill in this information to identify your case:

Debtor 1	<u>Lara</u>		<u>Fakhoury</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Central District of California</u>		
Case number (if known)	<u>6:25-bk-15107-SY</u>		

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
<u>Child</u>	<u>24</u>	<input type="checkbox"/> No.	<input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>22</u>	<input type="checkbox"/> No.	<input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>20</u>	<input type="checkbox"/> No.	<input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>19</u>	<input type="checkbox"/> No.	<input checked="" type="checkbox"/> Yes.
		<input type="checkbox"/> No.	<input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$7,824.00

If not included in line 4:

4a. Real estate taxes	4a. <u>\$0.00</u>
4b. Property, homeowner's, or renter's insurance	4b. <u>\$0.00</u>
4c. Home maintenance, repair, and upkeep expenses	4c. <u>\$80.00</u>
4d. Homeowner's association or condominium dues	4d. <u>\$0.00</u>

Debtor 1

Lara

Fakhoury

Case number (if known) **6:25-bk-15107-SY**

First Name

Middle Name

Last Name

		Your expenses	
5.	Additional mortgage payments for your residence , such as home equity loans	5.	<u>\$0.00</u>
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	<u>\$300.00</u>
6b.	Water, sewer, garbage collection	6b.	<u>\$150.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$300.00</u>
6d.	Other. Specify: _____	6d.	<u>\$0.00</u>
7.	Food and housekeeping supplies	7.	<u>\$800.00</u>
8.	Childcare and children's education costs	8.	<u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9.	<u>\$150.00</u>
10.	Personal care products and services	10.	<u>\$150.00</u>
11.	Medical and dental expenses	11.	<u>\$0.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$300.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$0.00</u>
14.	Charitable contributions and religious donations	14.	<u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	<u>\$0.00</u>
15b.	Health insurance	15b.	<u>\$0.00</u>
15c.	Vehicle insurance	15c.	<u>\$250.00</u>
15d.	Other insurance. Specify: _____	15d.	<u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	<u>\$0.00</u>
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	<u>\$0.00</u>
17b.	Car payments for Vehicle 2	17b.	<u>\$0.00</u>
17c.	Other. Specify: _____	17c.	<u>\$0.00</u>
17d.	Other. Specify: _____	17d.	<u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	<u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19.	<u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.		
20a.	Mortgages on other property	20a.	<u>\$0.00</u>
20b.	Real estate taxes	20b.	<u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c.	<u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d.	<u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e.	<u>\$0.00</u>

Debtor 1

Lara

Fakhoury

Case number (if known) **6:25-bk-15107-SY**

First Name

Middle Name

Last Name

21. **Other.** Specify: _____

21. + \$0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$10,304.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$10,304.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$15,472.86

23b. Copy your monthly expenses from line 22c above.

23b. - \$10,304.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$5,168.86

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Fill in this information to identify your case:

Debtor 1	<u>Lara</u>	<u>Fakhoury</u>
	First Name	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Last Name
United States Bankruptcy Court for the:	<u>Central District of California</u>	
Case number (if known)	<u>6:25-bk-15107-SY</u>	

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$1,500,000.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$98,806.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$1,598,806.00</u>

Your assets

Value of what you own

Part 2: Summarize Your Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$810,000.00</u>
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3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$18,650.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>\$106,002.00</u>

Your total liabilities

\$934,652.00

Your liabilities

Amount you owe

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$15,472.86</u>
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5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$10,304.00</u>
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Debtor 1 Lara Fakhoury Case number (if known) 6:25-bk-15107-SY
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$4,346.66

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$18,650.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$50,861.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	<u>\$69,511.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Lara</u>	<u>Fakhoury</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Central District of California</u>		
Case number (if known)	<u>6:25-bk-15107-SY</u>		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.


You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X 

Lara Fakhoury, Debtor 1

Date 09/16/2025
MM/ DD/ YYYY